FEE ADDRESS INDICATION FORM

Mail Stop M CORRESPONDENCE Director of US Patent and Trademark Office P.O. Box 1450 Alexandria, VA 22313-1450

Please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with the following Customer Number:

Ms. Marlene Shinn Astor Office of Technology Transfer National Institutes of Health 6011 Executive Boulevard, Suite 325 Rockville, Maryland 20852

Payor's Number if Assigned: Customer #005318

Payor's Telephone Number: 301/435-5282

in the following listed application(s) or patent(s) for which the Issue Fee has been paid.

PATENT NUMBER	SERIAL NUMBER	PATENT DATE (if known)	U.S. FILING DATE
	10/049,586		February 12, 2002

Typed name of person s	signing:	Gwendolyn D. Spratt.
		Owner of Record
(Check one)		Owner of Necord
	\boxtimes	Owner's attorney or agent of record Registration No.: 36,016
		Assignee's Recorded Reel Frame
Address of Signer:	Needle & Rosenberg, P.C. Suite 1000 999 Peachtree Street Atlanta, Georgia 30309	